DISCLOSURE SUMMARY	PAGETING (11)	tin.	DR-2	DIRECT PRIME
COMMITTEE NAME (Must be same as on Statement of On			tev. 12/2005)	DISCLOSURE REPORT
Baxter for Supervisor	m		or Office Use O	
		1 1		
MPORTANT: Indicate by # type of committee you are report 1) Statewide/Legislative/Judge Standing for Retention Cand	idate / 2 State DAC / 3 IState Barty	1 1		
4 /County Control Committée (5)County Candidate (6)Cit	v Candidate (7)School Board or Other	1 1		## \$100 Minus
rolltical Subdivision Cendidate (8)County PAC (9)City PA subdivision PAC (11) Local Ballot Issue	AC (10)School Board or Other Political) l		
ANDIDATE COMMITTEES ONLY:		A.	idied	المنظم المساعد
Candidate Name	Political Party (If applicable)		File with:	المنظمة العسمية الم
Kenner McDermott Baxter	Democrat		lowa Ethics and	
Office Sought	District (if Senate or House)		Disciosure Boat 510 E. 12 th , Ste.	
County Supervisor			Des Moines, lov	
ite reports are subject to possible civil and criminal penaltie	o Current Land Code and Code Code		Fa.c 515-281-3	
e candidate, for a candidate's committee, and the challpers dividual responsible for filling timely and accurate reports.	son, for any other type of committee, is the	ZA(/)		
Boner My lemos Falto	7/2-78/- 23	95	1//	x/09
GNATURE OF PERSON FILING REPORT	TELEPHONE	- J., H	DATE 8	GNED
AM FILING A January 19, 2008	REPORT FOR (1) ELECTION /(ONONERIE	CTION YEAR.	
(repor date)	Indicate by	- Invited		
•	•	# Li		
CHECK IF AMENDMENT TO REPORT DATED		Local Con	ımi llees, ente r (Date of Election
		Cass		
STATE	MENT OF CASH ON HAND			
ASH ON HAND at the beginning of the reporting period. (To	otal of all funds held by the			
committee. This amount MUST be the same as the	cash on hand at the end		0.00	
of the last reporting period or must be zero if this i	s first report filed.)			
ADD TOTAL MONEY TAKEN IN THIS PERIOD			1,909.00	
Schedule A: Cash Contributions total (Attach Scho	• •		0,00	
Schedule F: Loans Received total (Attach Schedul			0.00	
Schedule H: Total Sales of Campaign Property (At	tach Schedule H)		0,00	
(Schedule H applies to Candidates' C	committees Only)			
	SUB-TOTAL	\$	1,909.00	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	•		1 006 12	
Schedule B: Expenditures total (Attach Schedule	B) (**also see debts and loans below)		1,906.13	
Schedule F: Loan Repayments total (Attach Sched	iule F)		0.00	
ASH ON HAND at the end of this reporting period (if final re	port balance must		2.87	
be zero) (Attach DR-3)		\$	2141	
UNPAID BILLS (From Schedule D - Attach Schedule D)		2	0.00	
•			57.00	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched			0.00	
*OUTSTANDING LOANS (From Schedule F - Attach Schedu	ШФ Г)		YES /	NO.
CONSULTANT BREAKDOWN (Schedule G Attached?)		_		, 170
CANDIDATE COMMITTEES ONLY:		_	0.00	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Att	ach Schedule H)	\$		

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

Resel Form

SCHEDULE

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)		RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
Baxter for Supervisor		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibite the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
07/14/08	ID# CK#	Helen Pigg 602 E. 8th St., Atlantic, IA 50022		\$25.00	
08/04/08	ID# CK#	Phil Hascall P.O. Box 206, Atlantic, IA 50022		50.00	
10/07/08	ID# CK#	Helen Pigg 602 E. 8th St., Atlantic, IA 50022		25.00	
10/07/08	ID# CK#	Holen Pigg 602 E. 8th St., Atlantic, 1A 50022		25.00	
10/07/08	ID# CK#	Cass Co. Democrats, Helen Pigg, Treasurer 602 E. 8th St., Atlantic, IA 50022		144.00	
10/16/08	ID# CK#	Randy Baxter P.O. Box 71, Marne, 1A 51552	husband	500.00	
10/17/08	ID# CK#	Glen Smith 54939 Buck Crock Rd., Atlantic, IA 50022		200.00	
10/24/08	ID# CK#	Coffee group fundraiser-pass the hat		40.00	1
10/28/08	ID# CK#	Jan Muller 71908 630th St., Griswold, IA 51545		20.00	
11/07/08	ID#	Kenner Baxter P.O. Box 71, Marne, IA 51552	self	880.00	
			SUB-TOTAL	\$ 1,909.00	
		TOTAL (If last p	age of this schedule)	\$ 1,909.00	7

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

8CHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Baxter for Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/20/08	ID#	Clarke American Chk Order TierOne Bank, 509 Chestnut Atlantic, IA 50022	Checks for Campaign account	\$ 17.95
10/16/08	ID# CK#1001	Meredith Communications 413 Chestnut Atlantic, IA 50022	Radio ads running 10/28/08 thru 11/04/08 on KSOM radio	173.85
10/16/08	ID# CK# 1002	KJAN Radio P.O. Box 389 Atlantic, IA 50022	Radio ads running 10/28/08 thru 11/03/08 on KJAN radio	300.00
10/28/08	ID# CK# ₁₀₀₃	Postmaster, Marne Post Office 202 Washington St. Marne, IA 51552	Stamps for campaign mailing	231.00
10/29/08	ID# CK#1004	Atlantic News Telegraph 410 Walnut St. Atlantic, IA 50022	Newspaper ad to run in Atlantic News Telegraph	193.80
11/07/08	ID# CK#1005	J&J Graphic Design 217 Walnut St. Atlantic, IA 50022	150 yard poster signs; 100 frames; 7 large yard signs	984.53
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 1,906,13
TOTAL (if last name of this schedule)				\$ 1,006.13

TOTAL (if last page of this schedule) \$ 1,906.13

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowe Code 88A.402(3)(i).)

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FOR INSTRUCTIONS, SEE BACK OF FORM COMMITTEE NAME (Must be same as on Statement of Organization)		SCHEDULE E (Rev. 06/97)	IN-KIND
Baxter for Supervisor			
	Reset Form		K THIS BOX IF DING FORM
		<u> </u>	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
10/15/08	Randy Baxter P.O. Box 71, Marne, IA 51552	husband	paper for campaign hand-outs	50.00	
10/28/08	Randy Baxter P.O. Box 71, Marne, IA 51552	husband	copy paper for campaign mailing	7.00	
	:				
	:				
			SUB-TOTAL	\$ 57.00	
			TOTAL (if last page of this schedule)	\$ 57.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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